



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 SEP 15 AM 10:27

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

My Place Cafe II LLC

2. The complete street and mailing addresses of the initial designated/principal office:

317 W. Dalton Ave Coeur d'Alene, Id 83815  
(Street Address)

1869 E Setlice Way #154 Post Falls, Id 83854  
(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Lloyd Renfrow  
(Name)

1869 E Setlice Way #154  
(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

<u>Name</u>	<u>Address</u>
<u>Denise Renfrow</u>	<u>1869 E Setlice Way #154</u>
<u>Lloyd Renfrow</u>	<u>" " "</u>
_____	_____
_____	_____
_____	_____

5. Mailing address for future correspondence (annual report notices):

1869 E Setlice Way #154 Post Falls ID 83854

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature Denise Renfrow  
Typed Name: Denise Renfrow

Signature \_\_\_\_\_  
Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
09/15/2010 05:00  
CK: 1942 CT: 251200 BH: 1239019  
1 @ 100.00 = 100.00 ORGAN LLC # 2  
1 @ 20.00 = 20.00 EXPEDITE C # 3

W96405